



COUNTY BOROUGH OF BURY.

ANNUAL REPORT

OF THE

Medical Officer of Health

FOR THE YEAR

1943,

BY

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CHIEF MATERNITY AND CHILD WELFARE OFFICER,

CHIEF TUBERCULOSIS OFFICER AND CHIEF VENEREAL

DISEASES OFFICER.



HEALTH COMMITTEE, 1943.

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Deputy-Chairman - Councillor W. ELLIOTT.

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Meetings.—The Monday in each month immediately preceding the 16th day before the Council, at 10-0 a.m.

PUBLIC HEALTH DEPARTMENT

TITHEBARN STREET,

BURY.

June, 1944.

To the Chairman and Members of the
Health Committee, Bury County Borough.

LADIES AND GENTLEMEN,

I have pleasure in submitting the Annual Report for 1943 on the health of the inhabitants of Bury County Borough.

BIRTH RATE.

The birth rate in 1943 was 15.13 per 1,000 population. For reasons already given in a previous Annual Health Report, a more true perspective is obtained if the numbers of annual births are mentioned, when it is desired to compare one year or set of years with other years. The number of births in 1943 was returned as 807, and this is the third highest annual number during the last ten years. As with the corresponding birth rate 15.13 per 1,000, which is a crude rate, the number 807, when compared with numbers of annual births in other years, is fairly satisfactory when used in the same community for a short series of years, up to ten years, or in comparing the fertility of communities where populations are known to be nearly, but not quite, equal in their age and sex conditions and in marital conditions. The more accurate method whereby the birth rates have been standardised by using a correction factor supplied by the Registrar-General has not been used for some years, since the factors have not been given.

Provided the necessary correction factors had been given there would have been noted a decline generally in the birth rates in recent years, with the exception of a very small increased rate for the year 1942.

The family is the unit of the nation, and as this decline in the number of births has been fairly general for some time, it must be admitted that we are becoming an old nation. This outlook then is serious, and the results of a diminishing number of births will be far-reaching in their effects. For instance, we cannot escape the necessity of making provision for the old people in the community. Younger members of a family may have to aid in this direction, and the most the State can do would be to supplement the income of old people by a small allowance. There will be a less number of young people in the future if the decline in the number of births is not arrested. Moreover, to complicate the matter we have had to sacrifice a certain amount of our foreign investments, which provided this nation with a title to a large percentage of our imports and thus lifted the standard of living accordingly. It may be that the purchasing power of money will decline after the war. If it does, then the contractual rate of benefit promised in any scheme formulated now to provide benefits all round may have to be supplemented later. It seems unwise to make any large scale promises at present about any contractual rate of benefit unless we can see clearly ahead. There is no doubt about it, that as an exporting nation we will have to work extremely hard after this war in competition with other nations. We shall have to export goods to counterbalance the costs of the imports of foods and goods. We shall require to add to our own production. To consider, also, is the vast amount of capital depreciation and wastage to make good before our industries are in anything like the same position as in 1938 or 1939.

The decline in the number of births in this country is chiefly due to economic factors, and any propaganda, intended to be well meant at the time, which does not take account of hard facts, is misleading and may be fertile in future trouble. As with individuals, so with communities. Broadly they will get as much out of the world as they put into it.

It is paradoxical that in the recent past we have been striving to produce plenty so that there should be want in certain directions. It is also unpardonable that certain articles of food have been destroyed to keep prices up, as has been done formerly.

The fear of insecurity has had a deterrent effect in limiting the size of families, but given a reasonable chance of securing more or less steady employment at fair wages by the breadwinner of a family and a certain amount of leisure and pleasure, I am convinced that the average Britisher does not desire a life of dull monotonous ease depending upon the State for nearly everything.

That there should be earlier marriages is held to be a first essential necessary for a larger quota of young populations being produced. Ages at marriage have become later and later during the last fifty years. The simple reason is that economic circumstances have become such that people could not afford to get married at an early age. The economic circumstances cannot be improved by scattering about too much "money" or promises, and the mere passing of these does not alter the total productivity of a nation, but ends up in inflation, which leads to ultimate want. It is also hoped that nothing so out of date as a return to the gold standard will be attempted in the future, as was done after the last war with such disastrous consequences, creating masses of unemployed and a fall in the purchasing power when buying articles required from abroad.

It appears that the whole financial and economic systems require overhauling to bring them up to date with world conditions. Not until then will there be security and freedom from want, and cheaper and better housing, food, clothing and all that are necessary to make a fuller, freer, and more contented life, which will be more conducive to the upbringing of larger families.

The writing is already on the wall that a people cannot flourish unless they strive to create such conditions. The victories of peace are more lasting than the victories in war. The exaltation of one nation or group of nations obtained by force of arms, and accompanied by the horror and sacrifice of war, has never yet led the world to peace and concord. The conflict and destruction now engaging the world, and the surface turmoil, distract attention from activities of infinitely greater significance in the end. Hope is centred upon the abolition of the various out-of-date arrangements in high finance which have proved so fruitful of disaster in the past, and benefited but a few individuals or groups of individuals, and the encouragement to science to contribute more to the advance of men in matters both material and intellectual.

DEATH RATE.

The death rate for the year 1943 was 15.74 per 1,000 population and the number of deaths was 829. As with the birth rate, the death rate is a crude one. If corrected for the distribution of persons of different ages and of the two sexes, it becomes the standardised death rate. The necessary factors for the corrections have not been given by the Registrar-General for some years. A crude death rate can be held as the initial test of the vitality of a population. As a test of the healthiness of a district, especially a small one which has an exceptionally small death rate, it can be regarded with suspicion. A crude annual death rate in a small area such as in this town may be compared with a crude annual death rate in the same area within a short period, say ten years, but not with a crude annual death rate in another area. Owing to the marked differences in the distribution of the population due to age and sex, the crude death rate, even in large cities, should not be compared over large periods of time. The standardised death rate is more correct.

The number of deaths, 829, which occurred in this Borough in 1943 is the fifth lowest number of deaths in any year within the last ten years.

As expected, a greater proportion of deaths than usual occurred amongst old people. A large proportion of the younger people are in the forces, etc., which left a much older population in the town exposed to a much higher mortality risk.

Death rates are useful and necessary figures when comparing one period with another, and in exploring to discover fatalities from certain diseases. It is equally, or more, necessary to have access to statistics concerning the extent of disease in the living. We have such statistics for instance in the incidence rates of the various infectious diseases, etc., but practically none for the incidences of heart diseases, cancer, rheumatism, gastric ulcer, kidney diseases and nervous diseases, each of which causes disablement at some time or another and to loss of health and efficiency, and therefore of happiness and of being of better service to one's fellows, to say nothing of the fatal terminations in some instances. One is aware that in the National Health Insurance Scheme such statistics of the living are or could be available. If a real endeavour is made to pursue a positive health policy in the near future, it will be necessary that accurate statistics of the living be in the hands of Public Health administrators and others interested more in the prevention of disease than in the statistics of the dead. Being in possession of the statistics of the living would lead to a more proper assessment of each disease, help materially in research, cure, and in some cases, better still, in prevention.

INFANTILE MORTALITY.

The year under review has been notable for the phenomenally low infantile mortality rate of 26 per 1,000 births. This, the lowest rate ever reached in the history of the town, is almost too good to be true. It means that only 21 children under one year of age died in 1943.

The rate is about one-half of the next lowest rate, 50 per 1,000 births, recorded in 1939, and under one-third of the rate, 84 per 1,000 births, registered ten years ago.

It has been asserted by many Public Health Authorities that the infantile mortality rate is the most sensitive index of social welfare. Another Public Health assertion, "If babies are well born and well cared for their mortality would be almost negligible," is more sweeping than the former assertion. Many infantile deaths are due to causes over which is yet there is no full and effective control, such as premature births, deformities and other so far seemingly unavoidable defects. However, a considerable proportion, about one-half, are due to preventable causes, chiefly, but not always, the results of ignorance, apathy and neglect.

Amongst the causes may be listed lack of care in the expectant mother not seeking medical advice early enough; inadequate and unskilful assistance at birth; unsuitable care of the baby directly after birth; artificial feeding in some cases; dirty, stale and bacteria laden milk; unsuitable feeding; lack of cleanliness; bad housing conditions; imperfect hygiene and sanitation; lack of maternal care; illegitimacy; alcoholism; syphilis and other communicable diseases.

The phenomenally low infantile mortality rate completely eclipses all other former rates, and it may be some years before it is equalled or bettered. It is a milestone in the history of Public Health in the borough, and a succession of a number of rates so low, however desirable, may be hard to attain.

A good deal of credit for the production of low Infantile Mortality rates in recent times, must be given to the various services in the Public Health Department, including the Maternity and Child Welfare, Municipal Midwifery, and Health Visitors' and Sanitary Inspectors' Services. The newly-recorded low rate for 1943 is one which all those concerned with may justifiably feel proud.

STILL BIRTHS.

It is also pleasing to note that the still birth rate for 1943, 31.2 per 1,000 live and still births, is the lowest rate of the kind ever recorded in the borough. It is a little more than one-half of the still birth rate of ten years ago.

A still birth means the birth of a dead child at a period at which it should be viable. The death may take place in the ante-natal period or shortly before birth.

The cause of such a tragedy may be due to disease in the mother, such as kidney disease, malnutrition, anæmia, fever, syphilis, tuberculosis, or to hæmorrhage whilst pregnant, or to defects in the child itself. As mentioned in the preceding paragraph, neglect on the part of the expectant mother not seeking medical advice early enough is a factor. Also there are some due to causes which so far cannot be remedied, such as in some defects in the child itself. Complications during childbirth may cause the death of the unborn child.

Visits to ante-natal clinics by the mother can prevent many of these complications arising.

It is significant that in recent years there have been a great increase in the numbers of expectant mothers at the ante-natal clinics, where discoverable and preventable causes of still births have been remedied and sound advice has been given to mothers to avoid such a happening.

INFECTIOUS DISEASES.

During the year 220 cases of Scarlet Fever were notified to this Department. A large proportion, 181, was removed to hospital. In many cases there was no need for this, as most of the cases were mild, and the occupation of the hospital beds by Scarlet Fever cases sometimes made the securing of beds for cases of infectious diseases of a more serious nature difficult. There were no deaths from Scarlet Fever in 1943.

The number of notifications of diphtheria received was 73. Here is a more serious disease than Scarlet Fever. All the cases were removed to hospital for treatment. There were four deaths from diphtheria in 1943, as compared with one death in 1942, no deaths in 1941, one death in 1940, and three deaths in 1939. In each case where a death occurred none of the patients had been immunised against the disease.

At the end of 1943, 4,872 school children and 1,402 pre-school children had been immunised against diphtheria. In 1936, when but 738 children had received a course of immunisation, there were 14 deaths from diphtheria. It has been proved up to the hilt that immunisation is a safeguard against the disease. It has happened year after year in this town that the fatal cases which occurred were those where the parents or guardians either neglected or avoided having the children so safeguarded. No warning could be plainer to neglectful or careless parents, who bear a grave responsibility in not having had their children protected by such a simple and harmless process.

No less than 123 cases of pneumonia were notified in the year under review. Of these there were 56 deaths. The over-sanguine hopes that the mortality from pneumonia would be quickly lessened by the use of the sulphonamide drugs to almost vanishing point have not been realised. Some types of pneumonia are resistant to these drugs. The newly-discovered substance, penicillin, may prove of more value in reducing the death rate, but it is unfortunately not yet available to the general public owing to the prior claims in the Services and due to the present difficulty in producing large enough quantities of the substance to go round.

Cases of pneumonia should be treated in hospital to the exclusion of other cases of infectious diseases, which could be treated at home. Year after year the majority of Scarlet Fever cases prove quite mild, and there are few if any deaths. Pneumonia is a much more serious and fatal affection.

There were 266 cases of whooping cough certified during 1943, and one death was attributed to this disease.

Measles notifications numbered 544, with one death. No less than 364 of the notifications referred to children between the ages of 3 and 10 years.

In view of the changed treatment of infectious diseases and the vastly improved results attained chiefly through the use of sulphonamides (for instance, the mortality from cerebro-spinal fever has been reduced from as much as 70 per cent. to 20 per cent.), the whole outlook concerning these diseases is changing. Other matters have been investigated lately, such as droplet infection and cross-infection, with revised ideas as results. Many other investigations are being carried out and intensified now in war-time. The greatest handicap, that of lack of adequate funds, has to be carried by even the most brilliant research workers in their investigations concerning the treatment and prevention of infectious diseases. Experimental epidemiology, such as they carry out, is primarily a part of preventive medicine or public health. In passing, it may be stated that the recent White Paper concerning a National Health Service hardly mentions Public Health at all, and seems to be concerned mainly with inducing the general practitioner to enter a State Medical Service which is not a complete Health Service; and with the curing of disease and not its prevention. The aims as outlined in the White Paper appear as far removed from a comprehensive Health Service as political jobbery is removed from pure science.

TUBERCULOSIS.

The death rate from all forms of tuberculosis during the year was 0.43 per 1,000 population, which represents a total of 23 fatal cases. This number equals the lowest number of deaths ever registered in the borough, 23 fatal cases in 1939. The death rate from all forms of tuberculosis in 1934 was 0.83 per 1,000 population or about double the death rate in 1943.

Since a patient suffering from tuberculosis in an infectious state is a danger to the community, all such cases should be segregated as soon as possible. In most cases, where Bury patients have been offered sanatorium treatment, they have readily agreed to undertake it. This has helped to keep both the death and incidence rates of the disease at comparatively low figures.

During the last ten years the annual death rates from tuberculosis (all forms) in Bury have been lower than the corresponding rates for England and Wales as a whole with one exception, when in 1934 the rate for Bury was 0.83 per 1,000, as against 0.76 per 1,000 for England and Wales.

The Government Scheme, whereby certain cases of pulmonary tuberculosis were granted financial allowances, was put into operation in the borough in August, 1943, and by the end of the year 39 cases were recommended for payment of allowances. The object of the Government Scheme is to encourage patients with early pulmonary tuberculosis to undergo sanatorium treatment for an adequate length of time and to allay what is perhaps a major anxiety of patients, their financial commitments. The Scheme is purely a war-time measure.

It is regrettable that the State has not so far made any allowances for cases of tuberculosis other than early pulmonary cases. This has caused a good deal of dissatisfaction and has not made the Scheme any easier to administer.

NUTRITION.

The present war has shown us how important adequate and well-balanced foodstuffs are to the human body. Energy is required by the body. This energy is derived from food, and is necessary not only when the body is working, but when it is resting to keep up the action of the heart, lungs and other important organs, and to maintain the bodily temperature. An inadequate food supply was one of the major reasons

for Germany's defeat in the last war. The public of this country owe a debt of gratitude to their Government that rationing and food control were brought in early and in a scientific manner in this war. All are agreed that the job has been a most successful one.

From the medical examination of adults at various clinics in the borough during the present war years, and from the more detailed examination of the school children, the general nutrition of the population can be pronounced good. During 1943 over 86 per cent. of the school children were of normal nutrition, about 7 per cent. were of slightly subnormal nutrition, about 6 per cent. were of excellent nutrition, and none was of bad nutrition.

The rationing scheme has been a success. In actual practice things don't pan out so well where the family is a small one consisting of two members. Single persons fare worse. Larger families come off best. Rationing has also been a good thing in a reverse way in that it has made millions of housewives more concerned with the matter of planning proper diets; food conscious in fact.

In the planning of future houses, it is to be hoped that a great deal more attention will be paid to the kitchen. This should be the best part of the house and not the worst, and well equipped with labour saving devices. A refrigerator or cool cellar for storing food is essential in every dwelling.

Every schoolgirl should be taught the important facts about food values, and the application of the knowledge so gained would be of inestimable value to future generations. More variety could perhaps be introduced into meals if meat were sold in small joints, boneless and practically without fat, and if one were able to buy just the exact quantity of vegetables. We are a wasteful nation and perhaps this is asking too much, but thought should be given after the war to the suggestions. A larger part of the family income might be, with advantage, allocated for the purchase of food, and not for rents, which could be less than they have been and are.

In order to devote more time to cooking the housewife would find relief from drudgery if fireplaces were abolished and anthracite stoves or central heating were installed in houses. Moreover, by such a change, atmospheric pollution would be less and the air much cleaner, thus making far much less slavery in a somewhat treadmill existence devoted, in Lancashire and in other industrial areas at least, to eternal cleaning. More time could be thereby gained to work in and take a pride in the kitchen and its products.

MATERNITY AND CHILD WELFARE.

Attendances at the Welfare Clinics in the town have been well maintained throughout the year. A total of 14,683 attendances by children was made in 1943, as against 14,718 attendances in 1942.

At the ante-natal clinics in the borough 184 expectant mothers made 825 attendances in 1943, as against 180 expectant mothers, who made 888 attendances in 1942. This section of the welfare service has developed enormously in recent years.

Child welfare and ante-natal clinics have helped in great measure to reduce the Infantile Mortality and Maternal Mortality rates, and in the improvement of child health and of the welfare of expectant and nursing mothers, through their advisory and other activities. These clinics have been carrying out their beneficent work for many years. After a testing time of over four years of total war, it can be stated that the health of the women and children of the town has been good, and in certain aspects better than in peace time years.

Again I beg to draw your attention to the need for new clinics being constructed. As you are aware the Council agreed in 1938 to construct three new clinics. One has been erected at Huntley Mount. This Clinic,

built on modern lines, was officially opened as a Welfare Clinic by the Mayor of Bury, Councillor L. B. Jones, in March, 1944, and it has been very well attended since the opening. There may be radical changes after the war, and what was thought a modern and up-to-date building some years ago may be considered in a few years time old-fashioned. I'm glad to say that the idea of converting old buildings into clinics was quite rightly abandoned when you agreed to have the three new clinics constructed.

No doubt other new clinics will be erected in different districts of the town, bearing in mind their accessibility, being in an open situation with no undesirable surroundings and not exposed to dust or noise. Other features will doubtless be, good ventilation perhaps air conditioned, ample light, pleasant internal decorating, and surrounding garden strips. It might be just as well to wait a little time after the war ends before commencing building instead of carrying on immediately to build on old-fashioned lines. Release of up-to-date material may take some years after the war. The introduction of Health Centres as outlined in the White Paper has to be borne in mind, and your project of 1938 may be abandoned and larger buildings may be required for several Health Services.

There were three maternal deaths in 1943 due to causes other than puerperal sepsis. During the last six years there has been only one death from puerperal sepsis. Formerly this disease caused half or more of the total maternal deaths. Ten years ago, the Health Committee in this town was very concerned about the high rate of maternal mortality which had persisted for many years and did not show any signs of diminishing. In fact, this was a black spot in Public Health in the borough. The problem was taken in hand along with other Public Health problems which had also been outstanding for some years, and fortunately the maternal mortality rate was reduced. During the last six years there has been an average of 1.6 deaths per annum. In 1934 there were eight maternal deaths, in 1941 there were none. During a period of successive years there will always be an irreducible minimum of maternal deaths due to causes over which there seems to be as yet no public health control, such as abortion, and the very low average figure of 1.6 maternal deaths in six years is most satisfactory. A figure approaching 1.6 for a similar period of successive years in the future can be considered equally satisfactory. The black spot has been removed.

Concerning the work of the Municipal Midwives during the year, 287 cases of confinement were attended, and the Midwives also made 5,769 lying-in and other visits to mothers. The Midwives attended the Ante-natal Clinics as usual to follow up their own cases who attended these clinics.

There is only one War-time Nursery in Bury conducted under the Corporation's supervision. This is in Maxwell Street. This Nursery has been very well run. The children have been relatively free from ailments and have been well nourished and cared for. The maximum number of children who were cared for at the Nursery during the year was 33. Such an institution is good in war-time, but the proper place for a child in peace time is at home.

VENEREAL DISEASES.

Usually there is an increased prevalence of tuberculosis and venereal diseases in war-time. Such has been found not to be the case in Bury. During the war years there have been less cases of tuberculosis notified and the lowest annual death rate from this disease was recorded in the present war period. The average annual death rate for all the war period was much lower than that found for a corresponding period in the last war.

The number of cases of venereal diseases have shown no appreciable increase in the present war period. The number of new cases for 1943 was less than the number of new cases for 1938.

Some years ago I wrote urging a stricter control over persons infected with venereal disease. According to the American Sanitary Code a person previously convicted of a prostitutional offence cannot be released from hospital unless such a person is no longer infected with venereal disease in a communicable form. Also, persons who handle food are forced by law to undergo a test in order to ascertain that they are not suffering from the disease. In other directions there is a very close control of venereal disease in America. How many years will elapse until we cease burying our heads in the sand in this country and take a more realistic view of the situation remains to be seen. The new Regulation adopted in this country recently whereby two persons infected from the same source can inform the Health Department of this source so that the infected woman can be treated has proved a failure.

SUMMARY.

It is very pleasant to cast one's mind back and review what has been accomplished in Public Health in the town during the last ten years. I must add that I am very grateful to the Members of the Health Committee for their unfailing help during that time.

Public Health administration is both a science and an art. Through organisation and the operation of various agencies the physical well-being of the general population has been improved. Not only has disease been prevented, but health has been promoted.

It is impossible to give all but the main points or high lights during the last decade.

At the beginning of my tenure of office here all the Public Health Services—Maternity and Child Welfare, Tuberculosis, Venereal Diseases, Sanitary Inspection, and General Public Health were reorganised. The whole borough was surveyed and a large scheme concerning the clearance of unfit houses was formulated. Maternal Mortality had been persistently high for many years, and there were many environmental health problems to be solved. Much of 1934 was spent in preparing to make an assault on the problems found. Systematic and special inspections were made of the whole area to discover and record insanitary conditions prejudicial to health, and a good deal of planning and re-grouping of staffs were completed. New and complete registers were formed for all purposes required by statute and for sections of work requiring permanent records.

The Public Health administration was kept elastic to keep pace with changing conditions and growing knowledge. It was not deemed wise to adhere to any rigid system which might have become outdated. Sound programmes were laid down and a request was made upon the Staff for sustained and loyal effort. This was never withheld.

It was not until 1935 that an attack in real force was made upon the many points, as by that time an adequate staff had been assembled. In 1934 there were only two Sanitary Inspectors, for instance. Far too few for a town with commitments as Bury had. The borough was split up into five districts with a fully-qualified Sanitary Inspector in charge of each district in turn responsible to a Chief Sanitary Inspector. All the Public Health Services had by this time been fully reorganised and a large slum clearance problem had been agreed to by the Council.

A scheme introduced to provide immunisation against Diphtheria was started, and 562 children were so protected against this disease during the year. The number of diphtheria cases in 1935 was 209. In 1934 there were ten deaths from this affection, and in 1935 there were eight fatal cases. There was a different story to tell in 1942, when there was only one death out of 73 notified cases of diphtheria. By that time some thousands of children had been immunised. Since the immunisation scheme started all deaths from diphtheria have occurred in those who had not received immunisation.

The construction of a new Venereal Disease Clinic was another feature of the year's work in 1935. Much work in reconstruction and repairs of dwelling-houses was carried out at this period. A good drive was made against insanitary conditions, and many obnoxious and unhealthy features were abolished. A completely new register of all retail shops in the town was formed, and the provisions of the Shops Acts as regards heating, ventilation, sanitary accommodation, etc., were put into force on a large scale. Whilst carrying on routine Public Health duties particular problems were concentrated upon and most energy was directed upon them. I must add here that the Public Health Staff received co-operation from individual members of the public, who were quite aware that all these changes were being made in the interests of the public welfare.

During 1936 a drive was made against Tuberculosis in order to ensure that individuals suffering from this disease obtained treatment early enough to create the best results. Contacts of persons suffering from tuberculosis were exhorted to attend the Dispensary and allow themselves to be medically examined. A good response was made. By so doing a large number satisfied themselves and their relatives that they were free from the disease. In very few cases was tuberculosis found or suspected in contacts. These undertook treatment or were placed under observation. All this work yielded golden dividends. In 1934 there were 38 deaths from pulmonary tuberculosis; in 1943 there were only 18 fatal cases from the same disease.

In 1936 the results of the reorganisation of the Public Health Services were tabulated and inscribed in the Annual Health Report for that year. Proceedings during the year included a survey of 15,000 houses in the town concerning overcrowding, the bringing up of a large number of food preparing premises to higher standards of hygiene, and much attention was paid to the purity and quality of the milk supply. Attendances at Corporation Clinics were increasing. All the time clinical investigations were being made and diseases studied. Good administration includes research. A new Welfare Clinic was opened in Tottington Road.

A scheme was launched in 1937 which has had a far-reaching effect. This project was the Municipal Midwifery Scheme. It has run smoothly and has been one of the factors responsible for the diminution of a high rate of maternal deaths.

A very satisfactory feature of the year was the very high standard of cleanliness of the milk supply to the borough. Records and the register of overcrowded houses in the town was completed, and 60 per cent. of the crowded houses were decrowded.

In 1938 the Council agreed to the provision of three new combined clinic buildings. Attendances at clinics had become by now very numerous. The total attendances at one type of clinic, Maternity and Child Welfare, had reached over 17,000 in this year, an increase of 6,000 from 1934. The former high rate of maternal mortality was coming under control. There were only two maternal deaths in the year.

Some time must elapse before the full force and value of improved conditions brought about by positive planning are determined. Generally Public Health matures slowly. After the spade work and planning of the years from 1935 onwards the fruits began to appear in the years 1938 and onwards. Public Health deals more particularly with mass phenomena of the community. A whole series of records as affecting the health of the general population now became evident.

In 1939 the Infantile Mortality rate dropped to the then lowest figure ever recorded, 50 per 1,000 births. This rate was 84 for 1,000 births in 1934. There was only one maternal death during this year. The death rate from all forms of Tuberculosis touched a then new record low figure. As to environmental hygiene, some 1,500 fresh water closets had taken

the place of troughs, privies and pails since 1934. By informal action close upon a score of cowsheds were reconstructed, and half a dozen new sheds built. Owing to the special attention which had been directed to the improvement in the methods of producing milk, a good and clean milk supply became commonplace. Many alterations were made at the Public Abattoirs to deal with a meat supply to 184,000 of a population.

In the following year, 1940, the Tuberculosis death rate dropped a few more points to establish a new record. One maternal death only occurred during the year. Notifications of diphtheria reached the lowest number (13) registered in a quarter of a century. There was a remarkable reduction in the number of Scarlet Fever cases. A good deal of work was carried out in connection with billeting and in inspecting military camps and billets.

It was very satisfactory to record for 1941 that there were no maternal deaths in that year. Progress had been made in immunisation of children against diphtheria. At the end of 1941 over 3,000 children had been so protected. The year was also notable for the lowest number of cases (30) reported of pulmonary tuberculosis up to that time. The Health Committee renewed the consideration of a new maternity home. This project was in view in 1935.

From 1942 a crop of new records followed. Two-fifths of the child population and over half of the school population had been immunised against diphtheria. The lowest number of deaths from and the lowest number of cases of tuberculosis for any year were returned. No fewer than 200 houses had been made fit by informal action. A War-time Nursery to accommodate 40 children was opened in September.

Statistics for the year 1943 revealed a phenomenally low Infantile Mortality rate. One became to expect a low number of maternal deaths each year. The average annual number of such fatalities was 1.6 per 1,000 births for the year 1938 to 1943 inclusive. There were only 18 deaths from pulmonary tuberculosis in 1943. This number is the least so far recorded in any year in the borough's history. In a corresponding year during the last war 66 persons died from this malady. The still birth rate in 1943, the lowest obtained, was about half the corresponding rate ten years ago. Over six thousand children had now been immunised against diphtheria.

In this account I have picked out a few main points. It is impossible in this short survey to mention many other improvements which have accrued. This resumé concentrates on a few vital points indicating the betterment of the health and environmental conditions of the population and is perhaps of more value than a more diffuse account.

This Annual Report on the health of your people is the last I shall have the honour of presenting. I desire to thank you most cordially for the full support you have accorded to me during my ten years' service in your town. I desire to thank all other officials for their courtesy and help given to me at all times. Also I would like to express my gratitude to all the doctors in the borough. All have been always most helpful and a very good relationship has existed throughout my period of office.

Last, but by no means least, I must give thanks to each member of the Staff, whose loyalty, hard work and happy relationship have been productive of so many excellent results and have made the work for me a pleasure.

I remain, Ladies and Gentlemen,

Yours obediently,

G. M. DAVIDSON LOBBAN, M.B., Ch.B., D.P.H.,

Medical Officer of Health.

SECTION 1.

STATISTICS OF THE AREA, 1943.

Area in Acres	7,434
Resident Population (Census 1931)	56,182
Rateable Value	£389,159

In the following summary, extracts from the vital statistics of the year are given:—

	Male	Female	Total	Rate per 1,000 population
Live Births... ..	410	397	807	15.13

	Male	Female	Total	Rate per 1,000 Live and Still Births
Still Births... ..	12	14	26	31.2

	Male	Female	Total	Rate per 1,000 population
Deaths	410	419	829	15.74

Deaths from Puerperal causes:—				Rate per 1,000 total births
Puerperal Sepsis	0			—
Other Puerperal causes	3			3.6

Percentage of total deaths occurring in public institutions, 36.5%
 Infantile Mortality Rate 26 per 1,000 births.
 Tuberculosis (all forms), Death Rate... 0.43 per 1,000 population
 Cancer Death Rate 1.86 ,, ,,

Death Rate of Infants under one year of age:—

All Infants per 1,000 live births	26
Legitimate infants per 1,000 legitimate live births..	24
Illegitimate infants per 1,000 illegitimate live births	59

Births.—The birth rate for 1943—15.13 per 1,000—is slightly lower than the previous year. The total number of births recorded during the year was 807. The birth rate for England and Wales for 1943 was 16.5 per 1,000 population.

Deaths.—The death rate per 1,000 of the population for 1943 was 15.74. There were altogether a total of 1,202 deaths registered in the County Borough. Of these deaths, 423 were of persons not usually resident in the Borough. By excluding these deaths of non-residents, the number of deaths is reduced to 779, to which must be added 50 deaths of Bury residents which have occurred in other districts. The number of deaths belonging to the County Borough is thus 829.

The following table shows the number of deaths of infants below one year of age and the rate per 1,000 births in Bury during the past twenty-five years:—

Year.	Number of deaths below one year of age.	Rate per 1,000 births.
1919 ...	68	92
1920 ...	102	91
1921 ...	93	85
1922 ...	78	82
1923 ...	88	101
Average for 5 years...	—	— 90
1924 ...	63	71
1925 ...	63	80
1926 ...	62	76
1927 ...	62	79
1928 ...	67	90
Average for 5 years...	—	— 79
1929 ...	61	79
1930 ...	51	69
1931 ...	48	71
1932 ...	62	85
1933 ...	40	53
Average for 5 years...	—	— 71
1934 ..	62	84
1935 ...	47	66
1936 ...	47	56
1937 ...	43	55
1938 ...	51	67
Average for 5 years...	—	— 66
1939 ...	36	50
1940 ...	47	65
1941 ...	55	68
1942 ...	58	68
1943 ..	21	26
Average for 5 years...	—	— 55

It will be seen from the above table that there is a progressive reduction of the Infantile Mortality Rate during the last twenty-five years, when five year periods are considered.

Causes of, and Ages at Death during the Year 1943.

Causes of Death.	Nett Deaths at the subjoined Ages of Residents, whether occurring within or without the District.									Total Deaths whether of Residents or Non-residents in Institutions in the District.
	All ages.	Under 1 year.	1 and under 2.	2 and under 5.	5 and under 15.	15 and under 25.	25 and under 45.	45 and under 65.	65 and upwards.	
All Causes Certified	815	19	9	11	14	13	55	253	381	683
Uncertified	14	2	..	..	..	..	..	6	6	..
Typhoid and Paratyphoid Fever...	..	..	..	..	..	..	..	..	..	..
Cerebro-spinal Fever	..	..	..	..	..	..	..	..	..	2
Scarlet Fever	..	..	..	..	..	..	..	..	..	..
Whooping Cough	1	..	..	1	..	..	..	..	..	2
Diphtheria	4	..	1	3	..	..	..	..	..	14
Tuberculosis of Respirat'y System	18	..	..	..	..	1	11	6	..	4
Other forms of Tuberculosis	5	1	2	1	..	..	..	..	1	3
Syphilitic Diseases	2	..	..	..	..	..	..	2	..	..
Influenza	27	..	..	..	1	1	1	13	11	1
Measles	1	..	..	..	1	..	..	..	..	..
Acute Polio-myelitis and Polio-encephalitis	..	..	..	..	..	..	..	..	..	..
Acute infectious Encephalitis...	2	..	..	1	..	..	..	1	..	1
Cancer of Buccal Cavity and (M)	8	..	..	..	..	..	..	3	5	10
Œsophagus (M), Uterus (F)	5	..	..	..	..	..	1	3	1	10
Cancer of Stomach and Duodenum	18	..	..	..	..	..	..	11	7	15
Cancer of Breast	8	..	..	..	..	..	1	3	4	7
Cancer of all other sites	59	..	..	..	..	1	7	21	30	58
Diabetes	6	..	..	..	..	..	..	2	4	6
Intracranial Vascular Lesions ...	100	..	..	..	..	..	3	27	70	77
Heart Disease	195	..	..	..	2	3	10	52	128	184
Other Diseases of Circulatory System	26	..	..	..	..	..	1	2	23	4
Bronchitis	86	1	..	..	..	1	2	24	58	5
Pneumonia	56	2	5	5	1	2	3	12	26	62
Other Respiratory Diseases	5	..	..	..	..	..	1	1	3	1
Ulcer of Stomach or Duodenum...	6	..	..	..	..	..	1	4	1	9
Diarrhoea under 2 years	3	3	..	..	..	..	..	..	..	1
Appendicitis	4	..	..	..	2	..	..	2	..	3
Other Digestive Diseases...	16	..	1	..	..	..	1	6	8	30
Nephritis	16	..	..	..	1	..	1	6	8	26
Puerperal Sepsis	..	..	..	..	..	..	..	..	..	1
Other Maternal Causes	3	..	..	..	..	..	3	..	..	8
Premature Birth	5	5	..	..	..	..	..	..	..	9
Congenital Malformation, Birth Injury and Infantile Disease ...	8	8	..	..	..	..	..	..	..	6
Suicide	7	..	..	..	..	..	3	1	3	1
Road Traffic Accidents	7	..	..	..	2	..	..	1	4	7
Other Violent Causes	10	..	..	..	1	1	2	2	4	16
All Other Causes	112	1	..	..	3	3	3	14	88	100
	829	21	9	11	14	13	55	259	387	683

VITAL STATISTICS OF WHOLE DISTRICT DURING 1943 AND PREVIOUS YEARS.

YEAR.	BIRTHS.		TOTAL DEATHS REGISTERED IN THE DISTRICT		Transfer-able Deaths of Non-residents registered in the District	Transfer-able Deaths of Residents not registered in the District	NETT DEATHS BELONGING TO THE DISTRICT.			
	Nett.						Under 1 Year of Age		At all Ages.	
	Number	Rate	Number	Rate	Number	Rate per 1000 net Births	Number	Rate		
1937	775	13.00	1220	20.46	362	64	43	55	922	15.46
1938	761	12.82	1081	18.20	322	53	51	67	812	13.80
1939	716	12.21	1254	21.59	414	54	36	50	894	15.39
1940	723	13.07	1402	25.35	480	48	47	65	970	17.54
1941	753	13.59	1130	20.40	398	47	55	68	779	14.06
1942	859	15.90	1106	20.47	417	58	58	68	747	13.83
1943	807	15.13	1202	22.82	423	50	21	26	829	15.74

Area of District in acres (land and inland water)	7245	Total population at all ages.....	56,182
		Total families or separate occupiers	15,402
		Average number of persons per house.....	3.71
		At Census of 1931.	

SECTION 2.

GENERAL PROVISION OF HEALTH SERVICES IN THE AREA.

Laboratory Facilities.—These are provided at the following:

Public Health Laboratory, Manchester.

The Laboratory, Bury Infirmary.

The Broadfield Clinical Laboratory, Rochdale.

The examinations carried out at these laboratories are Wasserman reaction tests, biological tests, examination of water, etc.

At the Bury Venereal Diseases Clinic, laboratory facilities are provided, so that many specimens of infective organisms, etc., are examined there.

Chemical investigations are made in the cases of milk and foodstuffs by the Borough Analyst, Mr. T. R. Hodgson.

Ambulance Facilities.

(a) For Infectious Cases.—There are two motor ambulances owned by the Bury Joint Hospital Board for the transport of cases of infectious disease and tuberculosis.

(b) For Non-Infectious and Accident Cases.—The Bury Corporation provides four motor ambulances for the removal of accident cases and cases of illnesses requiring hospital treatment.

Nursing in the Home.—Home Nursing is not provided directly by the Council, but is carried out by the Bury Branch of the Queen Victoria's Jubilee Institution for Nurses. An arrangement has been entered into whereby, at the request of the Medical Officer of Health, one of the Association's Nurses visits and treats cases of certain infectious diseases.

Hospitals, Public and Voluntary.

The following is a list of hospitals used by inhabitants of Bury :—

Name and Situation.	Type.	No. of Available Beds.	Proportion of beds used by persons from Outside Bury Area.
(a) Within the Borough : Florence Nightingale Hospital, Bury.	Isolation ...	96	Approx. 40%.
Bury Infirmary, Bury. (Voluntary).	General ...	143	Approx. 50%.
Jericho Hospital, Bury.	General ...	729	Approx. 61%.
(b) Outside the Borough : Aitken Sanatorium, Holcombe, near Bury.	Tuberculosis Sanatorium.	70	72% by Lancashire County Council Cases.
Ainsworth Smallpox Hospital, Ainsworth, near Bolton.	Smallpox ...	28	Cases admitted as required.

Number of beds for Maternity Cases at Bury Infirmary	11
" " " " " Jericho Public Assistance Hospital...	24

In addition to the above, patients from Bury are admitted to Manchester institutions, principally: Manchester Royal Infirmary (General Medical and Surgical), Manchester and Salford Skin Hospital (Skin Cases), and St. Mary's Hospital (Maternity).

Local Government Act, 1929.—At the Jericho Hospital accommodation is available for the sick inhabitants of the area as before.

Poor Law Medical Out-Relief.—The arrangements in operation for the provision of medical assistance to those in poor circumstances remain unchanged. The Borough is divided into two areas for this service, and the Medical Officers in charge are Dr. H. Smith and Dr. E. Smalley.

Institutional Provision for the Care of Mental Defectives.—The Lancashire Mental Hospitals Board, of which the Bury Council is a member, deals with the Lunacy and Mental Deficiency Services.

SECTION 3.

SANITARY CIRCUMSTANCES AND SANITARY INSPECTION OF THE AREA.

REPORT OF THE CHIEF SANITARY INSPECTOR.

To the Medical Officer of Health

for the County Borough of Bury.

Sir,

I have pleasure in submitting in an abridged form my Report on the Sanitary Inspection of the Area for the year 1943 in accordance with Article 27 of the Sanitary Officers (Outside London) Regulations, 1935.

No changes in Staff have taken place during the year. Inspectors J. Gaskell and A. E. Snodgrass were successful at the examination held by the Royal Sanitary Institute in "Sanitary Science as Applied to Buildings and Public Works." Inspectors J. Gaskell and T. Marsh were successful at the examination held by the Institute of Sanitary Engineers for Associate Membership of that Institute.

The extra war-time duties reported in a previous Report continue to be carried out by this Section of the Public Health Department.

WATER SUPPLY.—Twelve samples of water from wells and other private supplies have been taken during the year and submitted for chemical and bacteriological examination; one sample of water from the towns mains was submitted for bacteriological examination and was found to be satisfactory. In accordance with Circular 10/44 of the Ministry of Health, the following report, for which we are indebted to the Engineer and Manager (R. Wyllie, Esq., A.M.Inst.C.E.) of the Irwell Valley Water Board, is submitted:—

"The County Borough of Bury is supplied by the Irwell Valley Water Board from mains passing through the area. These mains come from four different sources of supply, and all the houses supplied by the Board derive their water direct from the mains. The waters are all from moorland gathering grounds and are acid in character.

Schemes are in preparation for lime treatment of these waters as soon as circumstances permit."

The percentage of dwellings not supplied with water for domestic purposes from the town's mains is 0.392 per cent. Those houses using wells and other private sources of supply are situated considerable distances from the Board's mains.

SWIMMING BATHS.—Twelve samples were taken from swimming baths during the year, eight for bacteriological examinations, and four for chemical analysis, and the results indicate some improvement on those of previous years.

SEWERAGE AND DRAINAGE.—There were 818 inspections in respect of drainage defects and reconstructions during the year. Forty-four new sinks were fitted in dwelling-houses.

RIVERS POLLUTION, Etc.—Routine inspections of the water courses in the district were carried out during the year. The Department was consulted by the Inspector of the Lancashire Rivers Board in respect of one nuisance which was under consideration by the Board.

CLOSET ACCOMMODATION.—During the year the Corporation continued to supply water closet cistern and pedestal to owners who converted insanitary closets to fresh water flushing type of closet; 19 sets were supplied.

Thirty-eight additional closets were provided at factories and sixteen at dwelling-houses; 12 waste water closets and 4 trough closets were replaced by fresh water closets and 4 waste water closets were abolished. One privy closet was converted to a pail closet.

STORAGE OF HOUSEHOLD REFUSE.—One dry ashpit jointly used by 4 houses and 3 wall bins were abolished and 7 portable dustbins installed during the year.

VERMIN DISINFESTATION.—One hundred and twenty-one complaints of vermin infestation at dwelling-houses were received at the Office, and of these 100 houses were found to be infested. Inspectors made 536 inspections of these and other verminous premises, and a total of 209 houses were disinfested during the year. This work is carried out by spraying liquid insecticide in affected premises free of cost to owners and occupiers. Owners of business premises so treated are charged cost of materials and disinfectant's time.

We are informed by the Borough Engineer (John Chadwick, Esq., A.M.Inst.C.E.) that 12 Corporation Estate Houses were found to be infested and subsequently disinfested by his Department in the manner described in previous Reports. The general public appear more willing to notify the presence or suspected presence of vermin to the Department than was the case a decade ago.

HOUSES-LET-IN-LODGINGS.—The accommodation provided at the five houses remaining on the Register is for 64 adults and 1 child. Inspectors made 71 inspections during the year.

COMMON LODGING-HOUSES.—There are four houses registered in the Borough providing accommodation for 179 persons. Many beds are redundant to requirements, and approximately one-third only of the total are in use; 148 inspections were made and 4 notices were served and abated during the year.

CANAL BOATS.—No registered boats were reported at the Wharf.

TENTS, VANS AND SHEDS.—Six inspections of caravans sited on the Corporation Fairground were made during the year; no nuisances were reported.

RATS AND MICE DESTRUCTION ACT.—The Cleansing Superintendent is the Designated Officer under the Act. Forty-five visits re complaints of rats were made by the Sanitary Inspectors, and a considerable amount of drainage and structural repairs to buildings were carried out as a result.

NUISANCES.—To secure the abatement of nuisances, 624 informal notices were served and 563 of these were abated; 89 statutory notices were served, and 77 of these were complied with by the end of the year; 1,527 defects were remedied as a result of informal notices and following the service of statutory notices. During the year 545 complaints were received at the offices of the Department. Of these 133 were referred to other Corporation Departments for attention.

SMOKE ABATEMENT.—During the year 31 observations each of 30 minutes duration were made of smoke emissions from factory chimneys. No nuisances were reported. The average period of emission of dense black smoke per observation was 0.218 minutes.

STABLE PREMISES.—Forty-two inspections of stables were made, two notices were served, one of these had been abated by the end of the year.

CINEMAS, Etc.—Twenty inspections were made of places of entertainment. Two notices were served and abated during the year.

PUBLIC CONVENIENCES.—Inspectors made 116 inspections during the year, no defects were reported.

RAG FLOCK.—Four visits were made to premises using rag flock and two samples were obtained. These were submitted to the Public Analyst, who certified that they complied with the provisions of the Regulations.

OFFENSIVE TRADES.—There were 20 registered offensive trades in the Borough at the end of the year. 124 inspections were made and two notices were served under the provisions of the By-laws.

INFECTIOUS DISEASES.—Inspectors made 618 visits of inquiry and for disinfection in respect of 316 cases of infectious diseases and 17 visits to 5 schools for disinfection.

SANITARY ACCOMMODATION AT SCHOOLS.—Forty-five inspections were made of the sanitary accommodation at the schools in the Borough. The conversion of the privy closets at Unsworth school was commenced before the year ended, and four trough closets were replaced with water-closets at St. Thomas's School.

FERTILISER AND FEEDING STUFFS ACT.—During the year 5 samples of Fertilisers and four samples of Feeding Stuffs were submitted to the Public Analyst, who certified that the samples complied with the Regulations.

SHOPS ACTS.—One hundred and ninety-nine inspections of shops were made under the provisions of the Shops Acts 1912-1937; 3 contraventions were reported and abated by the end of the year.

FOOD CONTROL.—1,669 visits were made to shops and other food premises under the provisions of the Food Control Orders.

SANITARY INSPECTION OF THE DISTRICT.

Number and Nature of Inspections.

During the year 1943 the following inspections were made by Sanitary Inspectors to the premises detailed:—

Nature of Inspection.	Primary Insp'ns.	Re-ins- pectations.	Total Visits.
Houses under Public Health Acts	715	2,173	2,888
Water Supply :... ..	39	15	54
Tents, Vans, Sheds	6	—	6
Houses-let-in-Lodgings	60	11	71
Common Lodging Houses	145	3	148
Schools	39	6	45
Entertainment Houses... ..	19	1	20
Ashes Accommodation	202	499	701
Accumulations	20	21	41
Animals or Birds	12	2	14
Stable Premises... ..	36	6	42
Yards, Courts, etc.	12	17	29
Piggeries	71	14	85
Drainage—Testing	24	6	30
Inspected	408	316	724
Closets—Water	615	269	884
Pails or Privies	137	19	156
Rats and Mice	30	15	45
Urinals	116	7	123
Sewers and Street Gullies... ..	9	—	9
Cowsheds... ..	640	—	640
Milkshops and Dairies	333	—	333
Ice Cream Premises	1	—	1
Meat Shops for Meat Inspection... ..	191	5	196
Abattoir for Meat Inspection	554	—	554
Food Preparing Premises... ..	210	7	217
General Food Premises	916	—	916
Markets	111	—	111
Merchandise Marks Acts	585	—	585

Sanitary Inspection of District—Continued.

Nature of Inspection.	Primary. Insp'ns.	Re-ins- pections.	Total Visits.
Fertilisers and Feeding Stuffs Act	13	—	13
Offensive Trades	120	4	124
Factories	205	51	256
Workshops... ..	158	4	162
Bakehouses—Factory	208	1	209
Non-Factory... ..	237	7	244
Outworkers	4	—	4
Shops Act	196	3	199
Infectious Diseases	573	37	610
Disinfection	423	—	423
Smoke Abatement Observations	31	—	31
Premises Visited	2	—	2
Rivers Pollution Acts... ..	7	—	7
Miscellaneous Visits... ..	662	2	664
Interviews—Owners, Tradesmen, etc.	1,042	—	1,042
Verminous Premises	323	192	515
Visits re Food and Drugs—Formal	171	—	171
Informal	62	—	62
Visits—Rag Flock	25	—	25
Water	37	—	37
Other Visits	12	—	12
Milk—Pathological	77	—	77
Milk, Bacteriological	155	—	155
Housing—Section 9	3	52	55
Section 11	25	—	25
Clearance Areas	1	—	1
Other Visits	104	5	109
Disinfestation	21	—	21
Overcrowding	138	3	141
Rent Restrictions Act	8	—	8
Food Rationing Orders... ..	249	—	249
Suspected Food Poisoning	48	—	48
A.R.P.	437	1	438
A.R.P. Shelters	63	3	66
Cesspools	2	—	2
Food Control Prices	1,420	—	1,420
Diseases of Animals Acts	26	37	63
Cold Stores	1	—	1
Billets	15	—	15
	13,560	3,814	17,374

HOUSING.

No inspections of dwelling-houses for slum clearance were made during the year. The following table is the record of work carried out in respect of the sanitary condition of dwelling-houses:—

Inspection of Dwelling-houses during the Year.

1. (1) (a) Total number of dwelling-houses inspected for housing defects (under Public Health or Housing Acts)	744
(b) Number of inspections made for the purpose	2,225
(2) (a) Number of dwelling-houses which were inspected and recorded under the Housing Consolidated Regulations, 1925	29
(b) Number of inspections and re-inspections made for the purpose	81
(3) Number of dwelling-houses found to be in a state so dangerous or injurious to health as to be unfit for human habitation	26

(4)	Number of dwelling-houses found not to be in all respects reasonably fit for human habitation	610
2.	Number of defective dwelling-houses rendered fit in consequence of informal action by the Local Authority or their Officers	295
	Number of houses demolished	1
3. B.	(1) Number of dwelling-houses in respect of which notices were served requiring defects to be remedied	4
	(2) Number of dwelling-houses in which defects were remedied by owners after service of formal notices	3
C.	(3) Number of dwelling-houses in respect of which an undertaking was accepted under Sub-Section (3) of Section 11	13
4. A.	(1) Number of dwellings known to be overcrowded at end of year	8
	(2) Number of families dwelling therein	8
	(3) Number of persons dwelling therein	47
B.	Number of new cases of overcrowding reported during the year	2
C.	(1) Number of cases of overcrowding relieved during the year	3
	(2) Number of persons concerned in such cases	26½
	Number of Certificates of "Permitted Number" issued during the year	15

THE FACTORIES ACT, 1937.

The following tables show the inspections of factories, together with the defects found and remedied during the year :—

Inspection of Factories.

PREMISES.	NUMBER OF		
	Inspections	Written Notices	Occupiers Prosecuted
Factories with mechanical power	355	10	—
Factories without mechanical power	145	—	—
† Other Premises under the Act (including works of building and engineering construction, but not including outworkers' premises).	—	—	—
Total	500	10	—
† Electrical Stations should be reckoned as factories.			

Outworkers.

During the year three inspections were made at outworkers' premises. One list of outworkers was received from an outside Authority.

Defects Found in Factories.

PARTICULARS.	NUMBER OF DEFECTS.			Number of defects in respect of which prosecutions were instituted.
	Found.	Rem'di'd	Referred to H.M. Insp'ct'r	
Want of Cleanliness (S. 1)	2	2	—	—
Overcrowding (S.2.)	—	—	—	—
Unreasonable temperature (S.3.)	—	—	—	—
Inadequate ventilation (S.4.)	—	—	—	—
Ineffective Drainage of Floors (S.6.) ...	—	—	—	—
Sanitary Conveniences (S.7.) :—				
Insufficient	3	3	—	—
Unsuitable or defective	35	15	—	—
Not separate for sexes	1	1	—	—
Other Offences	—	—	—	—
(not including offences relating to home work or offences under the Sections mentioned in the Schedule to the Ministry of Health (Factories and Workshops Transfer of Powers) Order, 1921).				
Total	41	21	—	—

During the year nine Notices were received from H.M. Inspector of Factories referring to defects remediable under the Factory Act.

INSPECTION AND SUPERVISION OF FOOD.

There were 640 inspections of 105 registered Cowsheds and 333 inspections of dairies and milkshops.

Seventy-six samples of undesignated milk were obtained for cleanliness tests, 48 of these failed to pass the Methylene Blue test, and in 41 samples Bacillus Coliform was found to be present. Fifty samples of "Accredited" milk were submitted for examination and 20 of these failed to pass the Methylene Blue test, and in 10 samples Bacillus Coliform was found to be present. Fourteen samples of "Pasteurised Milk" were submitted for examination, 8 of these failed to pass the Plate Count test, and in 7 Bacillus Coliform was found to be present. All these samples satisfactorily passed the Phosphatase test. Seventy-six samples of milk were submitted for examination for the presence of T.B.; two samples of mixed raw milk and 1 sample of Accredited Milk were reported to contain tubercle bacilli.

The following particulars of the veterinary inspection of the cattle at the dairy farms in the Borough are taken from the reports supplied by the Divisional Veterinary Inspector (J. W. Wilson, Esq., M.R.C.V.S.) of the Ministry of Agriculture and Fisheries.

Number of veterinary inspections of dairy herds 207

Number of dairy herds inspected 4 times during the year 44

 " " " " 3 " " 8

 " " " " 2 " " 3

 " " " " 1 " " 1

The number of cattle at dairy farms in the Borough during the first quarter of the year was 1,295. There were 53 dairy farms registered for the production of milk at the end of the year, one dairy farmer having discontinued business. Three farms which were previously registered for the production of milk and which now have dry stock only, are included in the foregoing list of inspections.

At the end of the year there were 609 food shops recorded in the registers, 217 inspections were made at food preparing premises, 943 inspections at general food premises, 196 to meat shops and 445 at bake-houses; 4 notices regarding 11 defects were served, and 9 notices, including 15 defects, were abated during the year at these premises. There were 111 visits of inspection made to food stalls on the open Market, and during these and other inspections of retail food shops opportunity was taken to note that the provisions of the Merchandise Marks Acts in relation to food were being complied with. No contraventions were reported.

MEAT INSPECTION AT THE ABATTOIR.

The Public Abattoir continues to be used as a Government Slaughter-house by the Ministry of Food, and serves the area described in previous Reports.

During the year 1,950 carcasses required a detailed examination, and of these 908 were found to be affected with tuberculosis in varying degree as follows:—

Bulls, 27.78 per cent.; steers, 7.64 per cent.; heifers, 9.74 per cent.; cows, 51.03 per cent.; calves, 0.31 per cent.; and pigs 10.23 per cent.

The whole carcasses of 3 cows, 5 calves, and 22 sheep were condemned for causes other than tuberculosis. The total amount of meat found to be unfit for human food was 1.32 per cent. of the total amount slaughtered.

The following list of imported meat and meat slaughtered at the port of entry was received and inspected at the Abattoir; 13,328 quarters of beef; 100,675 carcasses of mutton and lamb; 16 carcasses of pork; 326 carcasses of veal; 28,158 boxes of offals, etc.

Carcases Inspected and Condemned.

	Cattle, excl'ding Cows	Cows	Calves	Sheep and Lambs	Pigs
Number killed	3,042	1,258	979	29,428	88
Number inspected.....	3,042	1,258	979	29,428	88
All Diseases except Tuberculosis.					
Whole carcasses con- demned	None	3	5	22	None
Carcases of which some part or organ was condemned.....	299	174	7	528	4
Percentage of number inspected affected with disease other than Tuberculosis...	9.83%	14.07%	1.23%	1.87%	4.55%
Tuberculosis only.					
Whole carcasses con- demned	2	37	None	None	None
Carcases of which some part or organ was condemned.....	252	605	3	None	9
Percentage of number inspected affected with Tuberculosis...	8.35%	51.03%	0.31%	None	10.23%

TABLE SHOWING EXTENT OF TUBERCULOUS DISEASES AND WEIGHTS OF DISEASED MEAT
DESTROYED YEAR ENDING 31st DECEMBER, 1943.

Kinds of Animals	Number Examined	Extent of Tuberculosis in Animals Examined															Other Diseases		
		Of which were Tuberculous	Heads	Thorax				Abdomen					Entire Carcase condemned owing to Tuberculosis	Weight of Meat and Offal destroyed on account of Tubercu- losis	Weight of Meat and Offal destroyed on account of other Diseases	Total weight of Meat and Offal destroyed for all Diseases			
				Lungs	Heart and Peri- cardium	Serous Membranes	Livers	Stomachs	Spleens	Kidneys	Intestines	Uteri					Serous Membranes	Mesenteries	Udders
Beasts ..	Bulls Oxen Cows Heifers <u>4300</u> 18 2172 1258 852 4300	5 166 642 83 <u>896</u>	273	669	75	221	237	104	135	127	158	28	125	144	120	— 1 37 1 <u>39</u>	53,065	7,947	61,012
Sheep ..	29,428	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	—	2,242	2,242
Pigs	88	9	6	4	—	1	2	2	—	—	3	—	2	3	—	—	393	18	411
Calves ..	979	3	—	—	—	—	3	—	—	—	—	—	—	—	—	—	9	204	213
	34,795	908	279	673	75	222	242	106	135	127	161	28	127	147	120	39	53,467	10,411	63,878

CONTAGIOUS DISEASES OF ANIMALS ACTS.

Foot and Mouth Disease.

During the year an Infected Area was declared, the boundaries of which touched the Southern boundary of the Borough—no cases were reported in the Borough.

Anthrax.

One suspected case found at the Railway Siding and Cattle Dock adjoining the Abattoir was reported to the State Veterinary Inspector, but was not confirmed.

Tuberculosis Order.

Three cows were slaughtered under the Order at the Abattoir. One case was reported by the State Veterinary Inspector from a farm in the Borough. The carcase was found to be affected with generalised tuberculosis and was condemned. The other two carcasses from farms situated outside the Borough were found to be affected with localised tuberculosis in each case. In all 9 notifications under the Order were received from the State Veterinary Inspector, and the remaining six animals were slaughtered at the Knackers' Yard.

Sheep Scab Order.

Two notices of intention to dip sheep at a local farm were received. The sheep dipping was witnessed by the District Sanitary Inspector.

FOOD AND DRUGS ACT—ADULTERATION.

Particulars of the foods and drugs sampled during the year.

TABLE I.

ARTICLE.	No. of Samples			No. Genuine			No. Adulterated		
	F'rml	In'f'l	Total	F'rml	In'f'l	Total	F'rml	In'f'l	Total
Ammoniated Tincture of Quinine	—	1	1	—	1	1	—	—	—
Baking Powder	—	1	1	—	1	1	—	—	—
Beer	4	—	4	4	—	4	—	—	—
Bicarbonate of Soda	—	2	2	—	2	2	—	—	—
Biscuits	—	1	1	—	1	1	—	—	—
Black Puddings	—	2	2	—	2	2	—	—	—
Boracic Acid	—	1	1	—	1	1	—	—	—
Boracic Ointment	—	1	1	—	1	1	—	—	—
Borax	—	2	2	—	2	2	—	—	—
Brandy	2	—	2	2	—	2	—	—	—
Bread	—	1	1	—	1	1	—	—	—
Butter	—	2	2	—	2	2	—	—	—
Camphorated Oil	—	2	2	—	—	—	—	2	2
Cheese	—	1	1	—	1	1	—	—	—
Cinnamon	—	1	1	—	1	1	—	—	—
Cocktails	4	—	4	1	—	1	3	—	3
Cocoa	—	3	3	—	3	3	—	—	—
Cod Liver Oil	—	1	1	—	1	1	—	—	—
Coffee	—	2	2	—	2	2	—	—	—
Coffee Essence	—	1	1	—	1	1	—	—	—
Cordials	3	—	3	2	—	2	1	—	1
Cough Pastilles	—	1	1	—	1	1	—	—	—
Cream Cakes	—	1	1	—	1	1	—	—	—
Custard Powder	—	1	1	—	1	1	—	—	—
Dried Milk	—	6	6	—	6	6	—	—	—
Egg Substitute	—	1	1	—	1	1	—	—	—
Epsom Salts	—	2	2	—	2	2	—	—	—
Essence of Cinnamon	—	1	1	—	1	1	—	—	—
Fish Paste	—	2	2	—	2	2	—	—	—
Flowers of Sulphur	—	1	1	—	1	1	—	—	—
Gin	4	—	4	4	—	4	—	—	—
Ginger	—	1	1	—	1	1	—	—	—

ARTICLE.	N o. of Samples			No. Genuine			No. Adulterated		
	F'rml	In'f'l	Total	F'rml	In'f'l	Total	F'rml	In'f'l	Total
Ginger Wine	—	1	1	—	1	1	—	—	—
Ginger Wine Essence	—	1	1	—	1	1	—	—	—
Glauber Salts	—	4	4	—	4	4	—	—	—
Gravy Browning	—	3	3	—	2	2	—	1	1
Iodised Throat Lozenges	—	1	1	—	1	1	—	—	—
Jam	—	3	3	—	3	3	—	—	—
Lemon Squash	1	2	3	1	2	3	—	—	—
Lime Water	—	1	1	—	1	1	—	—	—
Margarine	—	3	3	—	3	3	—	—	—
Milk	99	1	100	92	1	93	7	—	7
Mustard	—	1	1	—	1	1	—	—	—
Oatmeal	—	2	2	—	2	2	—	—	—
Olive Oil	—	1	1	—	1	1	—	—	—
Pancake Mixture	—	1	1	—	1	1	—	—	—
Pepper	—	1	1	—	1	1	—	—	—
Peroxide of Hydrogen....	—	1	1	—	1	1	—	—	—
Phanacitin & Caffeine Tablets	—	1	1	—	1	1	—	—	—
Pickles	—	1	1	—	1	1	—	—	—
Port Wine	3	—	3	3	—	3	—	—	—
Rum	1	—	1	1	—	1	—	—	—
Saccharin Tablets	—	1	1	—	1	1	—	—	—
Sauce	—	1	1	—	1	1	—	—	—
Sausages	—	3	3	—	3	3	—	—	—
Sherry	1	—	1	1	—	1	—	—	—
Stout	2	—	2	2	—	2	—	—	—
Sugar	—	1	1	—	1	1	—	—	—
Sulphur Tablets	—	1	1	—	1	1	—	—	—
Syrup of Figs	—	1	1	—	1	1	—	—	—
Syrup of Horehound	—	1	1	—	1	1	—	—	—
Tea	—	2	2	—	2	2	—	—	—
Tincture of Iodine	—	1	1	—	1	1	—	—	—
Tonic	3	—	3	1	1	2	1	—	1
Vaseline	—	1	1	—	1	1	—	—	—
Whiskey	8	—	8	8	—	8	—	—	—
Yeast	—	2	2	—	2	2	—	—	—
Zinc Ointment	—	1	1	—	1	1	—	—	—
TOTALS	135	87	222	122	85	207	12	3	15

PUBLIC HEALTH (PRESERVATIVES, Etc., IN FOOD) REGULATIONS, 1925, 1926, 1927.

All articles of food to which preservatives might be added were examined for the presence of preservatives. In no case was preservative found in any article to which the addition of preservatives are prohibited, nor in excess of the permitted amounts in any food to which it is permissible under the Public Health (Preservatives, etc., in Food) Regulations, 1925/7, to add certain preservatives.

FOOD SAMPLING AND ANALYSIS.

The average percentage composition of the Milk examined in 1942 was as follows:—

PERIOD.	No. of Samples.	Milk Fat per cent.	Solids not Fat per cent.
1st Quarter ...	26	3.46	8.74
2nd Quarter ...	15	3.26	8.84
3rd Quarter ...	31	3.60	8.81
4th Quarter ...	28	3.72	8.58
1st January to 31st December, 1943...	100	3.54	8.73

TABLE II.—Administrative Action taken in respect of samples reported by the Public Analyst not to be genuine or otherwise irregular.

No. of Sample		Article.	Nature of Adulteration.		Action Taken.
Inf'ml	Formal				
—	162	Spitfire Cocktail	Sample not genuine— Citric Acid 0.5% Other Solid Matter 0.3% Coloured and flavoured Water 99.2% 100.0%		Manufacturer prosecuted in the Borough Court and convicted. See Table III.
—	198	Phos-Vita Tonic	Sample not genuine— Phosphoric Acid 0.07% Quinine 0.02% Other Solid Matter 0.10% Coloured and flavoured Water 99.81% 100.00%		Manufacturer prosecuted in the Borough Court and convicted. See Table III.
—	199	Spit-Fire Cocktail	Sample not genuine.... Citric Acid 0.4% Other Solid Matter 0.3% Coloured and flavoured Water 99.3% 100.0%		Manufacturer prosecuted in the Borough Court and convicted. See Table III.
201	—	Gravy Browning	Sample not genuine — Salt 16.9% Organic Matter 2.6% Water 80.5% 100.0%		Formal sample No. 210 taken and proved to be genuine.
—	238	Milk	Deficient in Fat 14%.		Vendor prosecuted in Borough Court and convicted. See Table III.
—	240	Milk.	Deficient in Fat 2%.		Resolved—That the Town Clerk send a letter of warning.
38	—	Camphor-ated Oil.	Sample not genuine— Camphor 16.2% Oil 83.8— 100.0%		Resolved—Further sample to be taken.
61	—	Camphor-ated Oil	Deficient of 20% Champhor. Sample not genuine— Camphor 16.5% Oil 83.5% 100.0% Deficient of 13% Camphor.		Resolved—That the Town Clerk send a letter of warning.

TABLE II.—continued.

No. of Sample		Article	Name of Adulteration	Action Taken
f/ml	Formal			
—	82	Black-currant Flavour Cordial.	Sample not genuine— Citric Acid 1.6% Other Solid Matter 2.0% Coloured and flavoured Water 96.4% 100.0%	Resolved—That this case be referred to the Ministry of Food for consideration.
—	83	Spitfire Cocktail	Sample not genuine— Citric Acid 0.5% Other solid matter 0.3% Coloured and flavoured Water 99.2% 100.0%	Manufacturer prosecuted in Borough Court. See Table III.
—	103	Milk.	Added Water 7%	Vendor prosecuted in Borough Court. See Table III.
—	109	Milk.	Added Water 21%.	Vendor prosecuted in Borough Court. See Table III.
—	110	Milk.	Added Water 8%.	Vendor prosecuted in Borough Court. See Table III.
—	111	Milk.	Added Water 2%.	Vendor prosecuted in Borough Court. See Table III.
—	113	Milk.	Added Water 9%.	Vendor prosecuted in Borough Court. See Table III.

Details of Legal Proceedings—TABLE No. III.

Acts, Byelaws or Regulations under which proceedings were instituted.	Default or Offence.	Result.	Fines.	Costs.
Food & Drugs Act, 1938	Selling Spitfire Cocktail not of the nature, etc. demanded and under misleading label	Conviction	£30 0 0	£1 5 3
Food & Drugs Act, 1938	Selling Phos-Vita Tonic not of the nature, etc. demanded and under misleading label.	Conviction	£30 0 0	£6 11 0
Food & Drugs Act, 1938	Selling Spitfire Cocktail not of the nature, etc. demanded and under misleading label.	Conviction	£30 0 0	£1 6 3
Food & Drugs Act, 1938	Selling Milk deficient of 14% of Fat.	Conviction	£2 0 0	—
Food & Drugs Act, 1938	Selling Spitfire Cocktail not of the nature, etc. demanded and under misleading label.	Dismissed on payment of costs.	—	£1 0 0
Food & Drugs Act, 1938	Selling Milk adulterated by the addition of 7% of added water.	Conviction	£5 0 0	£1 11 6
	Supplier, summoned by defendant was discharged and awarded costs.	—	—	£5 5 0
Food & Drugs Act, 1938	Selling Milk adulterated by the addition of 21% of added water, and of 8% of added water (2 samples).	Conviction	£15 0 0	£1 1 0
Food & Drugs Act, 1938	Selling Milk adulterated by the addition of 2% of added water.	Conviction	£2 0 0	10 0
Food & Drugs Act, 1938	Selling Milk adulterated by the addition of 9% of added water.	Conviction	£5 0 0	10 6
	Total		£129 0 0	£19 2 0

In concluding this, my tenth and last report to you, on the administration of the Sanitary Inspector's Section of the Department, I am reminded that this completes the record of a decade of our work together towards securing improvement in the conditions of life of the people of Bury. I wish to express my appreciation of your confidence and support to me in the course of my duties during the whole period 1934 to 1944.

My thanks are also due to the Sanitary Inspectors and Clerical Staff, for their loyal co-operation during the year.

Yours faithfully,

Bury, June, 1944.

JOSEPH ECKERSLEY,

Chief Sanitary Inspector.

SECTION 4.

PREVALENCE AND CONTROL OVER INFECTIOUS AND OTHER DISEASES.

INFECTIOUS DISEASES GENERALLY.

Smallpox.—No case of Smallpox occurred in the borough during the year.

The following table gives particulars regarding vaccination during recent years:—

	1937	1938	Year ending December 31st.				
			1939	1940	1941	1942	1943
Number of Births ...	1,087	1,080	1,105	1,173	1,214	1,161	1,374
Vaccinated	14.17	8.05%	12.85%	14.66%	15.82%	26.44%	22.49%
Con. Objection Certs.	70.0	76.11%	67.96%	42.11%	52.64%	58.49%	58.44%
Unaccounted for ...	5.9	5.83%	9.41%	2.47%	5.52%	2.33%	3.64%

Scarlet Fever.—There were 220 cases of Scarlet Fever notified during 1943. None of these cases died. Of the notified cases 181 were removed to hospital for treatment.

In the majority of cases the infection was of a mild type.

Diphtheria.—There were 73 cases of Diphtheria notified during 1943, all of which were removed to hospital for treatment. There were four deaths from this disease during the year.

OTHER INFECTIOUS DISEASES.

Pneumonia.—There were 123 cases of pneumonia notified in 1943, and there were 56 deaths from this cause during the year.

Whooping Cough.—There were 266 cases of this disease notified, as compared with 10 in the previous year. There was one death.

Cerebro-Spinal Fever.—There were two cases of this disease notified during 1943.

Hospital Accommodation.

The hospital accommodation available for cases of infectious diseases, whether notifiable or not notifiable, is sufficient and is utilised to the best advantage.

Bacteriological Examinations.

The following are the particulars of the specimens bacteriologically examined during the year:—

	Positive.	Negative.	Doubtful.	Total.
Swabs for Diphtheria...	45	574	10	629
Blood for Typhoid Fever ...	—	—	—	—
Sputum for Tuberculosis ...	7	101	—	108
Miscellaneous Examinations	—	8	1	9

Table A.—Incidence of Notifiable Infectious Diseases (excluding Tuberculosis), Age Grouping, Ward Distribution, Cases Removed to Hospital, and Deaths during the Year 1943.

NOTIFIABLE DISEASES.	Total Cases Notified in Whole District.														Total Cases Notified in each Ward.					Total Cases remov'd to Hospital	Deaths of Notifi'd Cases.
	At all Ages.	At Ages										Moorside.	East.	Church.	Redcliffe.	Elton.	Unswth.				
		Under 1	1-2	2-3	3-4	4-5	5-10	10-15	15-20	20-35	35-45							45-65	Over 65		
Scarlet Fever	220	—	4	2	15	24	110	48	8	8	1	—	—	57	63	25	45	22	8	181	—
Diphtheria	73	—	4	1	3	25	20	7	8	5	—	—	—	15	22	13	10	9	4	73	4
Erysipelas	19	—	—	—	—	—	1	1	—	—	6	7	4	8	4	3	2	2	—	3	—
Ophthalmia Neonatorum	3	3	—	—	—	—	—	—	—	—	—	—	—	1	1	—	1	—	—	1	—
Cerebro Spinal Fever	2	—	—	—	—	—	1	—	—	—	1	—	—	—	—	—	2	—	—	2	—
Puerperal Fever	1	—	—	—	—	—	—	—	—	1	—	—	—	—	—	—	—	1	—	1	—
Puerperal Pyrexia	4	—	—	—	—	—	—	—	—	4	—	—	—	—	1	—	3	—	—	—	—
Encephalitis Lethargica	1	—	—	—	—	—	—	—	—	—	—	—	1	—	—	—	1	—	—	—	—
Malaria	1	—	—	—	—	—	—	—	—	1	—	—	—	—	1	—	—	—	—	—	—
Pneumonia	123	7	4	6	2	7	14	3	3	8	11	38	20	19	20	13	31	35	5	—	56
Whooping Cough	266	30	39	41	38	45	66	2	2	2	1	—	—	56	49	40	61	29	31	1	1
Measles	544	30	50	63	67	116	181	21	8	5	3	—	—	60	85	90	182	74	53	2	—
Totals	1257	70	101	113	125	217	393	82	29	34	23	45	25	216	246	184	338	172	101	264	61

Age in years
on 31st Dec.
of the
corresponding
year.

Persons inoculated each year from 1934-1943.

	1934	1935	1936	1937	1938	1939	1940	1941	1942	1943	
0	—	—	—	—	—	—	—	—	—	—	Total aged under 5 on 31/12/43.
1	—	19	4	1	—	3	6	103	140	262	
2	—	25	9	5	8	10	10	148	137	186	
3	—	33	12	4	4	11	17	119	77	161	
4	—	50	9	1	12	13	10	140	113	182	1,402.
5	—	92	16	5	14	6	12	165	115	224	Total aged 5-14 years on 31/12/43.
6	—	129	26	1	13	6	9	206	98	141	
7	—	21	25	2	7	6	5	213	95	177	
8	—	31	10	1	6	4	4	175	79	132	
9	—	30	8	1	3	5	6	199	74	126	
10	—	37	8	2	6	3	1	202	78	172	
11	—	28	9	3	4	3	3	186	44	148	
12	—	19	6	—	1	6	1	320	40	134	
13	—	21	7	—	2	4	—	31	59	116	
14	—	14	5	—	—	1	3	49	16	102	4,872.
15 and over	—	18	—	—	2	4	—	22	11	5	449
Total each year	—	567	154	26	82	85	87	2,278	1,176	2,268	6,723.

In calculating the totals at the end of 1943 no account is taken of deaths which
may have occurred since immunisation.

SECTION 5.

TUBERCULOSIS.

Incidence.

A total of 64 new cases was notified to the Health Department during 1943. Of this number 39 were males and 25 females.

The following table gives the number of cases notified and the death rates per 1,000 for each year for the last twenty-five years:—

TUBERCULOSIS 1919-1943.

Year	Pulmonary Tuberculosis		Other Tuberculous Diseases	
	No. of cases notified	Death rate per 1,000 pop.	No. of cases notified	Death rate per 1,000 pop.
1919	69	0·89	17	0·37
1920	68	0·83	28	0·25
1921	52	0·89	40	0·22
1922	43	0·61	36	0·26
1923	53	0·94	18	0·09
Average for 5 years...	—57	—0·83	—28	—0·24
1924	72	0·79	26	0·14
1925	72	0·97	32	0·19
1926	63	0·59	41	0·23
1927	70	0·72	47	0·21
1928	62	0·72	23	0·14
Average for 5 years...	—68	—0·76	—34	—0·18
1929	47	0·65	32	0·16
1930	52	0·60	26	0·23
1931	42	0·76	20	0·13
1932	45	0·45	16	0·18
1933	40	0·51	21	0·15
Average for 5 years...	—45	—0·59	—23	—0·17
1934	52	0·63	29	0·20
1935	34	0·48	25	0·16
1936	48	0·48	22	0·14
1937	41	0·50	30	0·15
1938	41	0·39	20	0·12
Average for 5 years...	—43	—0·50	—25	—0·15
1939	31	0·36	19	0·08
1940	31	0·31	13	0·11
1941	30	0·43	17	0·13
1942	25	0·39	10	0·07
1943	47	0·34	17	0·10
Average for 5 years...	—33	—0·37	—15	—0·10

Five year averages are indicated in the table since such periods can be considered fair ones for comparison. On perusal of the table it can be seen that the average death rate for the last five years is the lowest recorded for both Pulmonary Tuberculosis and other tuberculous diseases.

Diagnosis of Tuberculosis.

The diagnosis of tuberculosis is effected at the Tuberculosis Dispensary situated at the joint Clinics, The Wylde. The times of the sessions are Tuesday and Thursday morning at 10-0 o'clock weekly, and Wednesday evenings at 6-30 o'clock when necessary for the convenience of patients who are working during the day. Cases are obtained from reference by the patients' own private practitioner and from other sources. The Dispensary acts as a consultative centre and a sorting house at which patients can be advised to obtain the best possible treatment. The only treatment given at the Dispensary is that administered by artificial light therapy. The important part of the work at the Clinic is the examination of contacts of cases of pulmonary tuberculosis, and this work was carried out as usual during the year. One hundred and eighty-three X-ray examinations of tuberculous persons and of contacts were made. This branch of the work is most important, since X-rays often reveal the affection in early stages when most good can be done.

Home Visits.

During 1943, 1,381 visits were paid to the homes of patients by the Tuberculosis Officer and by the Health Visitors.

Treatment of Tuberculosis.

Institution treatment is given to cases of Pulmonary Tuberculosis at the Bury and District Joint Hospital Board's Institution (the Aitken Sanatorium at Holcombe, near Bury) and at the Jericho Hospital. Children suffering from Pulmonary Tuberculosis are sent to the Liverpool Open-Air Hospital for Children, Leasowe, and Shelf Sanatorium, Halifax.

Cases of Non-Pulmonary Tuberculosis are treated mainly at the Bury Infirmary, the Manchester and Salford Hospital for Diseases of the Skin, and the Robert Jones and Agnes Hunt Orthopaedic Hospital.

The number of patients treated at the various institutions, together with the patient days during 1943, are as follows:—

Institutions.	No. of patients (undischarged at end of 1942 and admitted during 1943).		No. of patient days.
Aitken Sanatorium	38	.....	6,058
Bury Infirmary	9	.....	257
Robert Jones and Agnes Hunt Orthopaedic Hospital, Oswestry	7	.....	1,330
Jericho Hospital	2	.....	32
Liverpool Open-Air Hospital for Children, Leasowe	17	.....	2,343
Liverpool Sanatorium, near Frodsham... ..	5	.....	485
Halifax Sanatorium, Halifax	1	.....	42
Wrightington Hospital, near Wigan... ..	1	.....	5
Royal Southern Hospital, Liverpool	2	.....	44
Manchester Royal Infirmary... ..	1	.....	15
Manchester & Salford Hospital for Skin Diseases:			
Out-patients	12		
Out-patient attendances... ..	80		

After Care.

This is a very important branch of the work. In 1943, ten patients received extra nourishments. Grants were made, comprising a total of 239 gallons of milk, and in certain cases eggs were granted where supplies allowed.

Patients discharged from sanatorium are kept in touch by our nurses and the tuberculosis officer by visitation at their homes. The patients also attend the dispensary for regular examinations. Employers were got in touch with regarding finding discharged patients suitable occupation. Various house owners were approached in order to obtain improved accommodation for persons who had completed their sanatorium treatment.

We have to thank the Bury Charity Organisation Society, which has helped tuberculosis patients by grants of food, clothing, etc., during 1943.

Allowances.

Under the Ministry of Health Memo. 266/T allowances were made to persons suffering from pulmonary tuberculosis. Up to the end of 1943 a recommendation for grant was made in 39 cases.

Public Health (Prevention of Tuberculosis) Regulations, 1925.

No case of Tuberculosis among employers in the milk trade was notified during the year; no action in this respect, therefore, being necessary.

SECTION 6.

VENEREAL DISEASES.

Treatment.

During 1943 patients suffering from Venereal Diseases were treated as before at the Joint Clinics, The Wylde. The Clinic sessions are as follows :—

Males.

Tuesday, 7-0 to 8-30 p.m.
Friday, 5-30 to 7-30 p.m.
Saturday, 10-0 a.m. to 1-0 p.m.

Females.

Tuesday, 5-30 to 7-0 p.m.
Thursday, 2-0 to 5-0 p.m.
Friday, 7-30 to 8-30 p.m.

Intermediate clinics for males and females are held every week-day.

Incidence.

The number of new cases during 1943 was 283, composed of 50 cases of syphilis, 64 of gonorrhœa, and 169 cases diagnosed as non-Venereal Disease. The out-patient attendances for 1943 were 4,218, and were 27 more than those of the previous year.

Bury residents accounted for 51.42 per cent. of the attendances made at the Clinic; Lancashire County cases accounted for 45.78 per cent., and other County Borough cases for 2.80 per cent.

The following table shows the number of new cases, consultations, intermediate attendances, and pathological examinations at the Venereal Diseases Clinic, 1939-43 :—

Year	New Cases.	Consultations by Medical Officer at Clinic.	Attendances at Clinic for intermediate treatment.	Pathological specimens examined by M.O. at Clinic.
1939	356	7505	3051	920
1940	326	5211	2477	903
1941	249	4015	1676	989
1942	210	3166	1025	859
1943	283	3437	781	832

During the year pathological specimens were sent from the Clinic to the Public Health Laboratory, Manchester, for examination as follows :—

For the Wasserman Test	514
For the Kahn Test	1
For Gonococcus	208

SECTION 7.

MATERNITY AND CHILD WELFARE.

Health Visiting.—During the year the Health Visitors made 8,388 visits to children between the ages under one year and up to five years of age.

Infant Welfare Centres.—These were held at the Joint Clinics, The Wylde (Monday and Tuesday afternoons and Friday mornings), and at 166, Tottington Road, Elton (Wednesday and Friday afternoons). The Clinics show an increase in attendances as compared with the previous year.

The following table gives particulars of Clinic sessions and attendances :—

	The Wylde.	Tottington Road.	Total.
Number of sessions held	148	100	248
Total Attendances made :—			
Infants under 1 year... ..	6303	2814	9117
Children 1 to 5 years... ..	4027	1539	5566
Number of Doctors' Consultations.	5504	2114	7618
Average attendance per session ...	70	43	—

Orthopædic Clinic.—Arrangements are in force for cases to be referred to Lancashire County Council's Orthopædic Clinic at Whitefield. In-patient treatment is provided under the scheme if necessary at the Biddulph Orthopædic Hospital, and at Ancoats Hospital, Manchester.

During 1943, 14 new cases had 19 consultations with the surgeon at the Whitefield Clinic, whilst 7 consultations were also given by the surgeon to old cases.

Ante-Natal Clinics.—Two ante-natal clinic sessions are held weekly—on Wednesday mornings at The Wylde and on Thursday afternoons at Tottington Road Clinic.

Attendances during 1943 were as follows :—

	The Wylde Clinic.			Tottington Road Clinic.		
	Ante-Natal	Post-Natal	Total	Ante-Natal	Post-Natal	Total
No. of new cases	127	—	127	57	8	65
No. of attendances	516	8	524	292	9	301

Dr. W. M. Martin, Obstetric Consultant at Bury Infirmary, has continued as Gynæcological Consultant to the Municipal Ante-Natal Clinics, and visits each clinic monthly to deal with special cases. At other times cases are referred to him at Bury Infirmary or Jericho Hospital.

In addition expectant mothers attend the Ante-Natal Clinics at the Bury Infirmary and Jericho Hospital. During 1943 the number of expectant mothers who attended these Clinics was 444 and 1,490 attendances were made. Also 196 post-natal attendances were made at these clinics.

Milk and Meals Assistance Scheme.—The Corporation has arranged for the provision of free milk (fresh and dried) to mothers and children and free meals to expectant mothers in necessitous cases where the family income, according to the number of persons, comes within a prescribed scale. Owing to the National Milk Scheme, the number of mothers and children who obtained free milk under the Corporation Milk Assistance Scheme was very few, and no grants of cows' milk were made during the year.

1. MILK: No. of applications for grants received 2
 " " " refused 1
 " " granted supply of dried milk 1
2. EXTRA NOURISHMENTS: Malt and oil, cod-liver oil, etc., to the value of £42, was supplied free of cost during the year to necessitous children attending the clinic.

Midwives.—The number of midwives registered as practising during 1943 was 28. Of these five were Municipal Midwives, 13 were midwives at Jericho Hospital, 5 were midwives at the Bury Infirmary, and 5 were midwives in private practice.

Municipal Midwives.—Four Municipal Midwives were employed by the Local Authority at the beginning of 1943. In July, 1943, an additional municipal midwife was appointed. The number of cases attended by these midwives during the year was:

As midwives, 255.

As maternity nurses, 34.

Since the municipal midwives have been in the Corporation's employ they have been required to assist at the municipal ante and post natal clinics.

It must, of course, be clearly understood that the services of the salaried midwives are not free, but payment is expected in accordance with financial ability. However, a scale of income with appropriate charges is in force, and in fact there have been a number of cases where the services were rendered free of charge.

The five midwives' names, addresses, and telephone numbers are:—

Name.	Address.	Tel. Nos.
Nurse M. H. Cunliffe ...	4, Maxwell Street, Bury.	Bury 1706.
„ D. M. Molyneux ...	do. do.	do.
„ M. M. Buckley ...	do. do.	do.
(Commenced duty 19th July, 1943.)		
„ M. Boyd... ..	68, Heywood Street, Bury.	Bury 1703.
„ V. Page	7, Fenton Street, Bury.	Bury 1711.

And the charges are:

£2 5s. 0d. as a midwife.
£2 5s. 0d. as a maternity nurse.
10s. for attention at other cases.

Maternal Mortality.—There were three maternal deaths in 1943, giving a maternal mortality rate of 3.6 per 1,000 total births. In 1942 the maternal mortality rate was 3.3 per 1,000 total births, and in 1941 there were no maternal deaths.

Puerperal Pyrexia.—Four cases of Puerperal Pyrexia and one case of Puerperal Fever were notified, and there were no deaths. One case was removed to the Florence Nightingale Hospital for treatment.

Ophthalmia Neonatorum.—Three cases of Ophthalmic Neonatorum were notified during the year, the rate per 1,000 live births being 3.7, as compared with 4.7 per 1,000 births in 1942. The following table gives further particulars:—

Cases.	Notified.	Treated.		Vision Unimpaired.	Vision Impaired.	Total Blindness.	Deaths
		At Home.	At Hospital				
3	3	2	1	—	—	—	—

Instruction in Mothercraft.—During school term, two sessions weekly are held at the Wylde Clinic, where instruction is given by the Senior School Nurse of the Education Department. The arrangement with the Education Committee continues, and girls in the last term at school attend in groups of not more than 30 at a time, each group attending for a period of six weeks, and they come from all the senior elementary schools.

Child Life Protection—Public Health Act, 1936.

(Section 206 to 220).

The duties and powers under the above, which make provision for the supervision of children who are nursed for gain apart from their parents, are administered by this department.

There were 18 foster parents on the Register at the end of 1943. The children nursed by these foster parents were visited by the four Health Visitors who are the appointed visitors under the Act. The number of visits made during the year was 87.

Boarding-out of Children.—The Council's administrative scheme under the Local Government Act, 1929, made Maternity and Child Welfare a declared service; therefore duties under the Order were imposed upon this department.

There were eight children on the Register at the end of 1943, and during the year 73 visits have been paid in connection with these boarded-out children.

SUMMARY OF WORK OF THE HEALTH VISITORS.

VISITS AND ATTENDANCES.

No.

First Visits to notified births	724
Re-visits to infants under one year of age	1848
Re-visits to children over one and under five years	3727
Visits to expectant mothers	96
Re-visits to expectant mothers	127
Visits re deaths of infants under one year of age	17
Re-visits during the summer diarrhœa season	2813
Visits re infectious diseases (including school notifications) :—	
Measles, Whooping Cough, Chicken-pox, etc.	1138
Visits re Ophthalmia Neonatorum	7
Visits re Puerperal Fever and Puerperal Pyrexia	4
Visits to houses in which cases of Tuberculosis have been notified	57
Re-visits to houses in which cases of Tuberculosis have been notified	1224
Visits to Midwives	7
Visits and enquiries re application under milk and meals assistance scheme	3
Visits and enquiries re applications for extra nourishments under Tuberculosis scheme	8
Visits re disinfection	20
Visits to Boarded-out, Nursed-out, and Adopted Children...	191
Visits re Diphtheria Immunisation	856
Visits for other causes	56
Attendances at Clinics :—Sunlight Clinics	20
Infant Welfare Centres	393
Tuberculosis, Morning Clinics	52
„ Evening Clinics	2
Diphtheria Immunisation Clinics	13
Total Visits	12923
Total Attendances at Clinics	460

